PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number

10/567246

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE			OR		R THAN ENTITY
U.S. NATIONAL STAGE FEES								RATE		FEE	7	RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		LARGE ENT. = \$ 300			BASIC FEE		15		BASIC FEE	
EXAMINATION FEE			Satisfies PCT . (4) ≐ \$ 5	Article 33(1)-	All other situations ⇒ \$100 / \$200			EXAM. FEE		150			-
SEARCH FEE			U.S. Is ISA = \$50/\$100 ALL other countries = \$200/\$400		All oth	All other situations = \$ 250 / \$ 500			CH FEE	200	•	SEARCH FEE	·
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =			X \$	125 =	-		X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			is minus 20 = ,		*		1	X \$ 25 =			OR	X \$ 50 =	
INDEPENDENT CLAIMS			S	ninus 3 =	* 6			X \$ 100 =			OR	X \$ 200 =	-
MULTIPLE DEPENDENT CLAIM PRESENT									180 =	600	-		
* If the difference in column 1 is less than zero, enter					" in col	umn 2	.		TAL	10 = 0	OR OR	+ \$ 360 =	
									•	1050	1 OK.	TOTAL	<u> </u>
CLAIMS AS AMENDED - PART (Column 1) (Column						(Column 3)) SMALL ENTITY				OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		R/	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	:		1	× \$	25 =		OR	X \$ 50 =	,
	Independent	*	Minus .	***		= '		X \$	00 ≈		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA				LAIM			+ \$ 1	80 =	<u> </u>	OR	+ \$ 360 =	
		·				· · · · · · · · · · · · · · · · · · ·	1	TOTAL			OR	TOTAL ADDIT.	
		(Column 1)		(Columr		(Column 3)	·,	•					:
計		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=			X \$ 2	25 =		OR	X \$ 50 =	
	Independent	*	Minus	***	=			X \$ 1	00 =		OR	X \$ 200 =	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA							+ \$ 1	30 =		OR -	+ \$ 360 =	
							· L	TOTAL A			L.	OTAL ADDIT. FEE	
			•				•						